ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	My	67814	2/2/00
O.I.P.E. CLASSIFIER		15	7-16 00
FORMALITY REVIEW	15/19	66 792	04/07/00
RESPONSE FORMALITY REVIEW			1 1 2

INDEX OF CLAIMS

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